

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Hillary for America

A. Full Name (Last, First, Middle Initial)

Krista Ramonas

Mailing Address 148 16th Ave

City

San Francisco

State

CA

Zip Code

94118-1017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kaiser Permanente

Occupation

Physician- Surgeon

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3700.00

Transaction ID : C1198124

Date of Receipt

M M / D D / Y Y Y Y
09 / 04 / 2015

Amount of Each Receipt this Period

2700.00

B. Full Name (Last, First, Middle Initial)

Judith Steele

Mailing Address 117 Cooke St

City

Daniel Island

State

SC

Zip Code

29492-7545

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Transaction ID : C1173634

Date of Receipt

M M / D D / Y Y Y Y
08 / 27 / 2015

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)

Devora Grynspan

Mailing Address 57 E Delaware Pl

Apt 2802

City

Chicago

State

IL

Zip Code

60611-1624

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Transaction ID : C1275604

Date of Receipt

M M / D D / Y Y Y Y
09 / 25 / 2015

Amount of Each Receipt this Period

500.00

Subtotal Of Receipts This Page (optional).....

3700.00

Total This Period (last page this line number only).....